FILE NOW: FILING FEE AFTER MAY 1 IS $155.00

CORPORATION ANNUAL REPORT
1995

FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

APPROVED AND FILED
95 MAY 31 AM 9:30
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # N22286 (1)

1. Corporation Name
PRAISE CHRISTIAN CENTER, INC.

Principal Place of Business	Mailing Address
ROUTE 2, BOX 20 PERRY FL 32347-9606	ROUTE 2, BOX 20 PERRY FL 32347-9606

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified: 08/04/1987
3a. Date of Last Report: 05/01/1994
4. FEI Number: 59-3129226 ☐ Applied For ☐ Not Applicable

2. Principal Place of Business	2a. Mailing Address
21 Country Rd.	26 RT 5 Box 83
22 Suite, Apt. #, etc.	27 Country Rd.
23 City & State: Perry. FL.	28 Perry. FL
24 Zip: 32347 25 Country: U.S.A.	29 Zip: 32347 30 Country: U.S.A.

5. Certificate of Status Desired ☐ **$8.75** Additional Fee Required
6. Election Campaign Financing Trust Fund Contribution ☐ **$5.00** May Be Added to Fees
7. Nonprofit with IRS 501(c)(3) Tax Exempt Status ☒ **$68.75** Supplemental Fee Not Required
8. *This corporation has liability for intangible tax under S. 199.032, Florida Statutes* ☐ Yes ☒ No

9. Name and Address of Current Registered Agent	10. Name and Address of New Registered Agent
WEBB, JESSE ROUTE 2, BOX 20 PERRY FL 32347	81 Name 82 Street Address (P.O. Box Number is Not Acceptable) 83 84 City FL 85 Zip Code

11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.

SIGNATURE _____ DATE
Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating)

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	D	11 TITLE	☐ Change ☐ Addition
NAME	WEBB, JESSE	12 NAME	200001504092
STREET ADDRESS	ROUTE 2, BOX 20	13 STREET ADDRESS	-06/02/95--01007--020
CITY ST ZIP	PERRY FL	14 CITY ST ZIP	*****61.25 *****61.25
TITLE	D	21 TITLE	☐ Change ☐ Addition
NAME	WEBB, JOYCE	22 NAME	
STREET ADDRESS	ROUTE 2, BOX 20	23 STREET ADDRESS	
CITY ST ZIP	PERRY FL	24 CITY ST ZIP	
TITLE	D	31 TITLE	☐ Change ☐ Addition
NAME	MIXON, DEAN	32 NAME	
STREET ADDRESS	1325 W. U.S. 98 HIGHWAY	33 STREET ADDRESS	
CITY ST ZIP	PERRY FL	34 CITY ST ZIP	
TITLE	D	41 TITLE	☐ Change ☐ Addition
NAME	FREEMAN, WARREN	42 NAME	
STREET ADDRESS	ROUTE 1, BOX 1390	43 STREET ADDRESS	
CITY ST ZIP	PERRY FL	44 CITY ST ZIP	
TITLE	D	51 TITLE	☐ Change ☐ Addition
NAME	WEBB, JUSTIN	52 NAME	
STREET ADDRESS	RT 1 BOX 1407	53 STREET ADDRESS	
CITY ST ZIP	PERRY FL	54 CITY ST ZIP	
TITLE		61 TITLE	☐ Change ☐ Addition
NAME		62 NAME	
STREET ADDRESS		63 STREET ADDRESS	
CITY ST ZIP		64 CITY ST ZIP	

RECEIVED BY MAY 1

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual report is true and accurate and that my signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 617, Florida Statutes; and that my name appears in Block 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE: Jesse Webb Jesse Webb 5/24/95 904 584-7600
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #

0028176